## PART B - FEE(S) TRANSMITTAL

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SUGHRUE MION, PLLC 2100 PENNSYLVANIA AVENUE, NW SUITE 800 WASHINGTON, DC 20037 Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

ADDI ICATIONINI	APPLICATION NO. FILING		DATE FIRST NAMED INVENTOR			OCKETNO	CONTEN	CONTERNALITION NO	
					ATTORNEY DOCKET NO.		CONFIRMATION NO.		
10/731,816 12/09/2003		David BURT	ON	CQ10430			4416		
TITLE OF INVENTION: METHODS AND APPARATUS FOR MONITORING CONCIOUSNESS									
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICAT FEE	ION PREV.	PAID ISSUE FEE	TOTAL FEI DUE	E(S)	DATE DUE	
nonprovisional	YES	\$755.00	\$300.00	·	\$0.00	\$1,055.0	\$1,055.00 06/17/2010		
EXAMINER			ART UNI	T CLA	SS-SUBCLASS				
	3735	3735 600-544000							
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.36				2. For printing	g on the patent front p	age list 1	Sughrue 1	Mion, PLLC	
$\Box$ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) ATTACHED. Use of a Customer Number is required.				(2) the name of a single firm (having as a member a registered attorney or agent) and the 3					
				names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be					
printed.									
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)									
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
Compumedics Limited Abbotsford, Australia									
Please check the approp	riate assignee categ	ory or categories (v	vill not be printed on t	he patent): 🗆 In	dividual ☑ Corporat	on or other priva	nte group enti	ty □ Government	
4a. The following fee(s) are submitted:			4b. Payme	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)					
☑ Issue Fee			☐ A check	☐ A check is enclosed.					
☑ Publication Fee (No small entity discount permitted)				☐ Payment by credit card. Form 1310-2038 is attached.					
☐ Advance Order - # o		☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-4880.							
				☑ The USPTO is directed and authorized to charge all required fees to Deposit Account No. 19-4880. Please also credit any overpayments to said Deposit Account.					
5. Change in Entity Stat	tus (from status indi	cated above)							
□ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).									
The Director of the USF	TO is requested to	apply the Issue Fee	and Publication Fee (i	f any) or to re-a	pply any previously p	aid issue fee to t	he application	identified above.	
NOTE: The Issue Fee a party in interest as show					the applicant; a regis	tered attorney or	agent; or the	assignee or other	
Authorized Signature /John M. Bird/ John M. Bird, #				# 46,027 Date			June 16, 2010		
Typed or Printed Name for William H. Mandir				Registration N	Jo.	32,156	32,156		